

**MINUTES OF THE
SOCIAL SERVICES APPROPRIATIONS SUBCOMMITTEE**
Room 30 House Building, State Capitol Complex
Wednesday, February 13, 2013

MEMBERS PRESENT: Sen. Allen M. Christensen, Co-Chair
Rep. Ronda Rudd Menlove, Co-Chair
Rep. Daniel McCay, House Vice Chair
Sen. Deidre M. Henderson
Sen. Peter C. Knudson
Sen. Brian E. Shiozawa
Sen. Evan J. Vickers
Sen. Todd Weiler
Rep. Edward H. Redd
Rep. Marc K. Roberts
Rep. Earl D. Tanner

MEMBERS ABSENT: Sen. Evan Vickers
Rep. Rebecca Chavez-Houck
Rep. Tim Cosgrove
Rep. Brad L. Dee
Rep. Paul Ray

MEMBERS EXCUSED: Pres. Wayne L. Niederhauser
Sen. Luz Robles

STAFF PRESENT: Mr. Russell Frandsen, Fiscal Analyst
Mr. Stephen Jardine, Fiscal Analyst
Ms. Paula Winter, Secretary

Note: A copy of related materials and an audio recording of the meeting can be found at <http://le.utah.gov>. A list of visitors and a copy of handouts are filed with the committee minutes.

Co-Chair Menlove called the meeting to order at 8:02 a.m.

No minutes to approve.

Public Comment

Several parents spoke representing Baby Watch Early Intervention: Jessica Packer, autism; Candice Leavitt, speech delay; Stewart Reeve, speech delay; Burgandy Keel, adoptive parent of multiple disabilities child including Down's Syndrome; Ashlie Baker, parent of triplets, 24 weeks gestation, several physical issues handled through in home intervention; Nate Johnson, 2 children with disabilities receive several therapies; Emily Daybell preemie daughter, therapists came to their home to teach skills; Crystal Ghica,

Part B intervention-preschool, coached the family to help; Steve Anderson, daughter with brain malformation, began at 2 months with Baby Watch Intervention; Marsha Johnson, Down's Syndrome; Tristin West, genetic syndrome child; Betsy Reddoch, twin boys with severe delays and expressive issues; Aubrey Jenkins, teacher and parent of Down's syndrome child; Tara Pursel, whose daughter is blind; Shaun Mower, provider, Early Intervention; Jodi Hansen, advocate Utah Family Voices. Each of the preceding spoke in favor of Early Intervention continued funding and support.

Public comment continued:

Johnnell Masson, dietician for Harmon's; Richard Bullough, Dr. Summit County Health Department;

Tamara Sheffield, provider, Intermountain Health Care, emphasized the importance of involving all to participate in prevention of obesity; Cameron Mitchell, President Utah Association of Local Health Departments; Miriam Hyde, Chair, Utah Disability Caucus. Each addressed the issues of obesity prevention and treatment as well as timely response and prevention of disease outbreaks with support and request for further funding. There were several handouts accompanying the presentations.

Mental Health Relationship with School Districts and Local County Entities

Adam Trupp, Utah Association of Counties, on behalf of local mental health providers, introduced Glenna Gallo, State Director of Special Education, Utah State Office of Education. Ms. Gallo introduced the program being used in schools and state and local agencies and how it is impacting students' needs by presenting data on student issues and treatment. She presented information that indicates efforts to improve require a comprehensive program that does not work in isolation. She stated that support needs to be available within the treatment. She noted positive results are evident as these practices are put into place. Ms. Gallo shared activities for prevention and planning. She referred to a handout which covers more detailed information on the activities. Efforts to share services across school districts are being made. Accessibility to services has increased as well as quicker responses to resolve issues at the lowest level rather than dealing with an escalated issue. The results have been keeping families together. In the most recent quarterly data from the Mental Health Early Intervention Pilot Program for Youth, 919 children received services in schools, 538 by family resource facilitators, and 336 who were in crisis were responded to. Adam Trupp referred to the handout for further information and continued to give testimony in favor of funding for treatment going out to communities.

Rep. Menlove commented that she had gone back to her local school district and inquired about the program there. There was a positive response about it and advised that individuals should go back to their local districts and inquire about services available in their schools. She encouraged the importance of services in the schools especially for young students.

The Children's Center on Seriously Mentally Ill Children

Dr. Douglas Goldsmith, Executive Director of the Children's Center, presented a request for \$250,000 to restore the level of previous funding for families being treated. He emphasized the importance of the allocation because it will be matched by \$750,000 of private funds raised by the Center. Dr. Goldsmith reported that 14 percent of the \$4 million budget is state funded and that over 80 families would receive services from the allocation. This Center serves children with mental health issues under the age of 8. There are over 2,000 families each year actively seeking support from the Center and several with severe behavior problems who use Early Intervention who come to the Center after they turn 3. He reported that the service area includes Salt Lake, Ogden and Provo areas. Dr. Goldsmith addressed the issue of trauma in children and how often they have been exposed to it. On average those in the program have been exposed to 3 traumas which makes up the highest risk group possible. This high risk, in turn, increases serious mental health issues, drug and alcohol dependence, increased divorce rates, and suicides. This high risk also leads to a lack of good choices in personal health care which leads to various health problems that can shorten life expectancy. He further commented that Early Intervention realizes long term benefits of over \$100,000 per child enrolled and he enumerated the areas where that would be evident. He also reminded the committee that all clients are expected to pay for part of the services received.

Rep. Menlove requested Dr. Goldsmith to explain the conference held this summer and the public's response. Dr. Goldsmith proceeded to explain the purpose and stated that awareness was increased and assistance was being asked for in other areas.

Rep. Roberts had a question about how the private funds were being raised and Dr. Goldsmith responded that the funds were private donations as well as foundation support.

The Alliance House

Dan Braun, LCSW and Executive Director, Alliance House, introduced Lila Hutchinson. Mr. Braun shared the purpose of Alliance House and Ms. Hutchinson shared her struggles with bi-polar illness and other health issues and how Alliance House was a positive influence in regaining her life in her own home. The request for this year is a one-time state investment of \$70,000 to match 2 to 1 a \$35,000 grant from the Hearst Foundation in 2012 to help support Alliance House members who are homeless or at risk to be so. Mr. Braun referred to the handout passed out for information on financial gains and benefits from stable housing.

Sen. Weiler shared his support for Alliance House. He advised the committee he had made the request for the appropriation. He also explained some of the services Alliance House is performing. Sen. Weiler requested that this \$70,000 be put high on the priority list.

Are There Better Ways to Prevent Tobacco Usage?

Dr. David Patton, Executive Director, DOH, introduced Heather Borski, Bureau Director of Bureau of Health Promotion, to explain the funds usage. Ms. Borski gave a brief overview of what they do, why they do it and how it is measured. A copy of the annual report was provided which includes information about specific local efforts. It was explained that though Utah has low tobacco use rates, it is still the leading cause of death, disease and disability in Utah. She spoke on the amount of money spent in Utah related to tobacco created medical costs and lost productivity. She stated that the tobacco industry spends \$50 million in Utah marketing their product. Tobacco prevention and control requires a comprehensive approach to be effective. She mentioned the levels at which control and prevention are being attacked and the purposes. Ms. Borski related the specific areas and efforts being used at the state level and also shared how data is collected and used to improve the program. Currently over half the funds being distributed go to local health departments. Another 20 percent is used to provide quitting services and the remaining funds are used for the media campaign and support of those. She spent some time covering the media campaign that is being used and the purpose for that. The process to evaluate their program through ROI is currently being utilized to continue to determine effectiveness. She continued to report on the effective avenues to present the negative effects of tobacco use.

Sen. Christensen asked what the local health departments do with the funding given them. Ms. Borski enumerated several programs including: working with schools to implement curriculum, conduct community education campaigns, work with worksites to create tobacco free environment, and support of local healthcare settings and clinics to insure tobacco users receive access to quitting services. Sen. Christensen editorialized on the fact that he would outlaw tobacco and use the funds for Early Intervention and Mental Health issues.

Sheila Walsh-McDonald's, Medicaid Ombudsman, presentation will be moved to another day/time.

Building Block Requests for the Department of Health (DOH)

Dr. Robert Rolfs, Deputy Director, DOH referred to a handout which includes a complete list of building blocks for the DOH. The Medicaid, CHIP, and background screening are included in that list. Dr. Rolfs talked through four building blocks not covered yet along with their services and the benefits. Specific information for these programs is covered in the handout. First, is the Baby Watch Early Intervention Program which was covered this morning in public testimony. Next, is Healthy Eating and Active Living which is based on recognition that obesity may be the most important public health program faced in this half century. Reference to data on the handout was given by Dr. Rolfs. He acknowledged the costs to society and also the savings if steps are taken to change the situation. Dr. Rolfs presented the next request, which is for a Data Security and Privacy Office. He presented some facts from the handout including information on HIPAA, penalties, and the 2012 breach of data. He also covered the responsibility of the Department of Technology Services and gave examples of how effective security needs to be established by the department. Data security includes both technical and administrative controls and security must be managed and monitored. Dr. Patton assured that what the DOH is requesting is the minimum needed. Dr.

Rolfs presented the last request which was Children with Special Health Care Needs which is to assist children in reaching their full potential. It provides evaluative and diagnostic services to children with complicated special health care needs. He stated that providers are brought together from different disciplines to provide diagnoses and an appropriate health care plan. He said that this will help provide services to rural areas as well as an increase in psychologists due to an increase in autism awareness and also due to an increase in caseload.

Rep. Tanner wanted clarification on the \$2.8 million incremental increase and where the program stands now. Dr. Rolfs replied that the total budget of the program is about \$24 million and the need is due to increases in caseload and population and also because there were federal funds that had allowed for that increase but are no longer available. The increase in caseload represents several years. In response to Rep. Tanner, Dr. Marc Babitz proceeded to explain the mix between federal and state funds in the program that \$5 million of the \$24 million is federal funding and about 1/3 of the \$24 million is Medicaid money.

Rep. Redd asked how Medicaid expansion would affect Baby Watch and would some of the services in that program be covered by Medicaid. Dr. Rolfs responded that the Medicaid expansion does not affect children, it affects adults. Baby Watch Early Intervention would not be affected and the part of that program to push people onto Medicaid will already be on Medicaid. Another part of the Affordable Care Act will move some children from the Children's Health Insurance Program to Medicaid and Dr. Rolfs stated that is beyond his knowledge to know whether or not that would affect financing of Baby Watch. Rep. Redd further asked for clarification of where the funding comes from and that the \$2.8 million is not new but is needed to keep the system going and Dr. Babitz said that is additional state funding that would pay for growth in caseload not covered by Medicaid. Dr. Rolfs further clarified that in this program when children are eligible for Medicaid the program can bill Medicaid for their services otherwise they are under the state's program. Rep. Redd wondered about what will happen in 2014 when all are supposed to have insurance what would happen then and Dr. Rolfs responded that it would depend on their coverage but in most cases this goes beyond a family's ability to match the insurance. These services are not the typical type of service and Rep. Menlove reminded that these are in-home and emphasis is on the parent's participation and follow-through.

Russell Frandsen, Fiscal Analyst, requested a funding breakout for Baby Watch Intervention, the 100 percent state-funded group, the Medicaid and the federal grant which he will get to the committee.

Rep. Redd referred to the Healthy Eating and Active Living Intervention for local communities and the \$650,000 request and if that is all that is being asked for. Dr. Rolfs acknowledged that it was. Rep. Redd further added that obesity is the causation of a number of other health issues.

Motion to Adjourn by Rep. McCay

Co-Chair Menlove adjourned the meeting at 9:47 a.m.

Minutes were reported by Ms. Paula Winter, Senate Secretary

Sen. Allen M. Christensen, Co-Chair
Rep. Ronda Rudd Menlove, Co-Chair